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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**Declaration  
Submitted  
with Initial  
Filing

OR

Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)**Attorney Docket Number**

920197.90365

**First Name and Inventor**

Robert M. Engelke

**COMPLETE IF KNOWN**

Application Number

Filing Date

Group Art Unit

Examiner Name

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

CAPTIONED TELEPHONE WITH EMERGENCY ACCESS CAPABILITY

*(Title of the Invention)*

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

**Prior Foreign Application  
Number(s)****Country****Foreign Filing Date  
(MM/DD/YYYY)****Priority  
Not Claimed****Certified Copy Attached?  
YES NO**☐  
☐  
☐  
☐☐  
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☐  
☐  
☐☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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**DECLARATION — Utility or Design Patent Application**

Direct all correspondence to: <input type="checkbox"/> Customer Number or Bar Code Label		26735	OR <input type="checkbox"/> Correspondence address below	
<b>Name</b> Nicholas J. Seay				
<b>Address</b> Quarles & Brady LLP				
<b>Address</b> P O Box 2113				
<b>City</b> Madison		<b>State</b> WI	<b>ZIP</b> 57301-2113	
<b>Country</b> US	<b>Telephone</b> 608/251-5000		<b>Fax</b> 608/251-9166	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>				
<b>NAME OF SOLE OR FIRST INVENTOR :</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
<b>Given Name</b> Robert M. (first and middle [if any])		<b>Family Name</b> Engelke or Surname		
<b>Inv ntor's Signature</b>			<b>Date</b>	
<b>Residence: City</b> Madison	<b>State</b> WI	<b>Country</b> US	<b>Citizenship</b> US	
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<b>Mailing Address</b>				
<b>City</b> Madison	<b>State</b> WI	<b>ZIP</b> 53716	<b>Country</b> US	
<b>NAME OF SECOND INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
<b>Given Name</b> Kevin (first and middle [if any])		<b>Family Name</b> Colwell or Surname		
<b>Inventor's Signature</b>			<b>Date</b>	
<b>Residence: City</b> Middleton	<b>State</b> WI	<b>Country</b> US	<b>Citizenship</b> US	
<b>Mailing Address</b> 1411 Willow Trail				
<b>Mailing Address</b>				
<b>City</b> Middleton	<b>State</b> WI	<b>ZIP</b> 53562	<b>Country</b> CA	
<input type="checkbox"/> Additional inventors are being named on the ____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.				

Please type a plus sign (+) inside this box → ☐

PTO/SB/02A (11-00)

Approved for use through 10/31/2002.

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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## DECLARATION

**ADDITIONAL INVENTOR(S)**  
**Supplemental Sheet**  
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<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Christopher		Engelke	
Inventor's Signature		Date	
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Mailing Address			
City	Madison	State	WI
ZIP	53716	Country	US
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
Country		Citizenship	
Mailing Address 75 Aadulam Street			
Mailing Address			
City		State	
ZIP		Country	
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
Country		Citizenship	
Mailing Address			
Mailing Address			
City		State	
ZIP		Country	

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